1332385

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



DATE RECEIVED

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMP	PTION L
Name of Offering (check if this is an amendment and name has changed, and indicate change) \$2,500,000.00 Class A Unit Offering	RECEIVED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Fype of Filing: New Filing Amendment	JUN 3 0 2005
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (Coeck if this is an amendment and name has changed, and indicate change) Walter Emich, LLC	198/6
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
7941 Ravenna Road, Hudson, Ohio 44236	_(330)656-0007
Address of Principal Business Operations (Number and Street, City, State, Zip Code) if different from Executive Offices) Same.	Telephone Number (Including Area Code)
Brief Description of Business	
Business was formed for the purpose of obtaining single premium immediate annuities (SPIA founding member and to finance and produce income therefrom.	s's) and life insurance policies on the life of the
Type of Business Organization	PROPER
The basis of the first and the form of	ease specify): PROCESSED
business trust limited partnership, to be formed Limited	Liability Company
Month Year	1111 0 8 2005
Actual or Estimated Date of Incorporation or Organization: 0 5 0 0 0 0 Actual Estimates	ated JUL 6 6 2666

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GENERAL INSTRUCTIONS

Federal:

Who Must File All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230 501 et seq or 15 U S C 77d(6)

CN for Canada; FN for other foreign jurisdiction)

When To File A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five 15) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures

Information Required A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part E and the Appendix need not be filed with the SEC.

Filing Fee There is no federal filing fee

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A, BASIC IDE	ENTIFICATION DATA		
2 Enter the information re	equested for the fol	llowing:			
 Each promoter of 	the issuer, if the iss	sucr has been organized w	rithin the past five years;	•	
 Each beneficial ow 	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer
· Each executive of	ficer and director o	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
Each general and a	managing partner o	f partnership issuers			
Check Box(es) that Apply:	✓ Promoter	Beneficial Owner	Executive Officer	Director	General and/or
					Managing Partner
Full Name (Last name first,	if individual)				
Meridian United Capital,	L.L.C.				
Business or Residence Address 8800 Gainey Center Driv	•	• • • • • • • • • • • • • • • • • • • •	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Canopus Management (Corporation				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
7941 Ravenna Road, Hud	dson, OH 44236				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Lost name first. Walter Emich	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	nde)	***************************************	
4174 Apache Place, Akro	on, OH 44321			•	·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Karen Marie Nye Irrevoca	able Trust				
Business or Residence Addre 6902 Hunting Hollow, Ln			ode)		
Check Box(cs) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Camela Nye Irrevocable	· ·				
Business or Residence Address 3000 Pine Trace Circle, I			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first. Nicole D. Nye Irrevocable	·				
Business or Residence Addre 114 Sands Point Drive,		· · · · · · · · · · · · · · · · · · ·	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first.	f individual)	1			
Business or Residence Addre	ess (Number and	Street, City, State. Zip Co	nde)		
	(Use blai	nk sheet, or copy and use	additional copies of this s	heet, as necessary)	

				MARK N	B. 1	NFORMAT	ION ABOL	T OFFERI	NG			ANJAY.	
1	Has the	issuer sol	d, or does t			ll, to non-a				•	***	Yes [No ⊠
2.	What is	the minin	num investo									S	
		. (1.0 1	10111 111 10511	none that v	00 0000	ptod mom	uny mann	, au ,				Yes	No
3	Does th	e offering	permit join	t ownersh	ip of a sing	le unit?		contract the second	***********		F 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		E
4	commis If a pers or state	ssion or sin son to be lis s, list the n	ilar remune sted is an as	ration for s sociated pe proker or d	solicitation erson or age calcr. If me	of purchas ent of a brol ore than fiv	ers in conn ker or deale c (5) perso	ection with or registere os to be list	sales of se d with the S ted are asso	curities in t SEC and/or	irectly, any he offering with a state sons of such		
	•	Last name nited Capi	first, if ind	ividual)									
Bu	siness or	Residence	Address (N	iumber an	d Street, C	ity, State, 2	Zip Code)						
			Drive, Suite		tsdale, AZ	85258							
Nai	ne of As	sociated B	roker or De	aler									
Sta	ies in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	:			······		
			s" or check				_					☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nar	ne of As	sociated B	roker or De	aler									
Sta	les in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)							□ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NII TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OII WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	Name (Last name	first, if ind	ividual)									
Bus	incss or	Residence	: Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nar	ne of As	sociated B	roker or De	aler						***			
Sta	ies in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers			******			
	(Check	"All State:	s" or check	indiv idu al	States)	111 Mar			-14	(1) 641 / · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	☐ All	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

•	sold Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	g 0.00	\$ 0.00
	Debt (Class A Units)	\$ 2,500,000.00	s 412,000.00
	Common Preferred Not App		
	Convertible Securities (including warrants).	\$_0.00 \$_0.00	0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify)	\$ 0.00	\$ 0.00
	Total	S 2,500,000.00	\$ 412,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	1	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases § 412,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		S
	Printing and Engraving Costs		S 2,000.00
	Legal Fees		\$ 20,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$ 50,000.00
	Other Expenses (identify)	_	\$
	Total		S 72,000.00

	C. OFFERING PRICE, NUMBER OF INVE	STORS, EXPENSES AND USE OF PR	OCEEDS	
	b Enter the difference between the aggregate offering price given and total expenses furnished in response to Part C — Question 4.a proceeds to the issuer.".	This difference is the "adjusted gross		2,428,000.00 \$
5 .	Indicate below the amount of the adjusted gross proceed to the iss each of the purposes shown. If the amount for any purpose is necheck the box to the left of the estimate. The total of the payments proceeds to the issuer set forth in response to Part C — Question	not known, furnish an estimate and listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		S	s
	Purchase of real estate		S	. 🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment		\$. [] \$
	Construction or leasing of plant buildings and facilities		\$	
	Acquisition of other businesses (including the value of securitie offering that may be used in exchange for the assets or securitie issuer pursuant to a merger)	s of another	¢	
	Repayment of indebtedness			
	Working capital	_		
	Other (specify): Purchase of annuities.			
			\$	
	Column Totals		\$_0.00	<u> 2,428,000.0</u>
	Total Payments Listed (column totals added)	COMMENT OF THE CONTROL OF THE CONTRO		428,000.00
	D. FEDER			
sign	issuer has duly caused this notice to be signed by the undersigned d nature constitutes an undertaking by the issuer to furnish to the US information furnished by the issuer to any non-accredited investo	luly authorized person. If this notice is S Securities and Exchange Commissi	s filed under Ru on, upon writte	tle 505, the following
lssu	ocr (Print or Type) Signature	Da	ile / O	~ ~ ~
Wa	alter Emich, LLC	WMM/	6-2	8.05
	ne of Signer (Print or Type) Title of Sign n R. Nye Manager	er (Print of Type)		

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE								
1	• • •	FR 230.262 presently subject to any of the disqua								
	•	See Appendix, Column 5, for state resp	oonse.							
2	The undersigned issuer hereby to D (17 CFR 239 500) at such ti		my state in which this notice is filed a notice on Form							
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees									
4	limited Offering Exemption (U		that must be satisfied to be entitled to the Uniform understands that the issuer claiming the availability a satisfied.							
	er has read this notification and k horized person	mows the contents to be true and has duly caused the	is notice to be signed on its behalf by the undersigned							
Issucr (I	Print or Type)	Signature	Date							
Walter E	Emich, LLC		6-28.05							
Name (F	rint or Type)	Title (Print or Type)								
John R	. Nye	Manager								

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Investors State Yes No Amount Investors Amount Yes No ALΑK AZAR CA CO CT DE DC \$412,000.00 0 FL \$2,500,000.00 3 \$0.00 × GA Ηĭ ID II. ĪΝ ĪΑ KS KY LΑ ME MD MA MI MN MS

APPENDIX 1 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price to non-accredited Type of investor and explanation of offered in state amount purchased in State investors in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Investors Yes No Amount Amount MO MT NE NV NH NJ NM NY NC ND HO OK OR PA RI SC SD TNTX UT VT VAWA WV WI

	APPENDIX								
I	Intend to sell to non-accredited investors in State Type of security and aggregate offering price offered in state			4 Type of investor and amount purchased in State				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted)	
State	(Part B	No	(Part C-Item 1)	Number of Accredited Investors	(Part C-Item 2) Number of Number of Accredited Non-Accredited				-Item !)
WY	res	140		investors	Amount	Investors	Amount	Yes	No
PR									